

in five pages or less. I don't disagree with the history Senator KENNEDY went through, with his powerful declaration, in that this is a critical issue that we must deal with, and I don't disagree with the fact that we have to have some serious pressure built here in the U.S. Congress to get this over the finish line.

That being said, I think we just got this language last night, and what Senator KENNEDY is asking us to do today is to bypass the committee and go immediately to the floor with his language. There are several reasons I am going to have to, ultimately, object to that.

The first is that he is correct. I and a number of my colleagues who would be here if I were not standing here have a real problem with the solution, the mechanism, that Senator KENNEDY has chosen—just outright price-fixing. Senator KENNEDY doesn't even try to deny that. It goes beyond imposing government regulatory price controls in government-run programs by going through the private market as well. That is a solution mechanism that I have opposed and many of my colleagues oppose in terms of dealing with this issue. That is one of the key reasons for my objection.

The other one, though, is that the Committee on Finance, of which I am the ranking member, is working on this. I know that this is not an answer, because the Committee on Finance has been working on this now for a year or 2 or more, but there is work underway in a number of different arenas to try to get a handle on how to solve this without having to take the drastic step of just having the government come in and take control over the private sector market.

I will just point to, for example, what happened under the Trump administration in just the last couple of years. Through the Trump administration's effort to try to deal with this, a demonstration project has been operating under Medicare Part D in which the effort was to try to get the monthly cost of insulin down to \$35 a month, and they have had some success in that program to demonstrate how it can be accomplished.

Now, look. I get that Medicare Part D is different than private sector insurance and that it is different than Medicaid and that it is different than other pieces of our healthcare system; it is also different than CHIP, but in one sector, a pretty significant sector, we have some solutions that are starting to show real potential.

In addition, as Senator KENNEDY knows, I drafted legislation in the last Congress and am working on that legislation in this Congress that will deal not just with insulin but with many different other pieces of drug pricing in our system.

I can tell you that Senator WYDEN himself, my counterpart on the Democratic side on the Finance Committee, has been working on his own ideas, and

he and I have been working hard to prioritize this to get to a solution in the committee. I know, as I talked to Senator WYDEN just before I came to the floor, that Senator WYDEN and I both welcome the opportunity to work with Senator KENNEDY as we try to put together that bipartisan solution.

I know that there would be other Senators on the other side of this issue who would stand here if I were not today and say they don't like this solution because they want it to go further in the other direction. They want to see a complete government takeover of the entire market and move to a single-payer system, that single payer being the government. That is another thing that some on my side have been working hard not to have happen.

There is a lot of political controversy over what the mechanism must be, and that is the primary reason I want this to be able to be worked on in the committee, in the proper way that we manage legislation in the Senate. I commit to Senator KENNEDY that he can be as engaged as he wants to be with us in that as we move forward, but it is not the time right now to come and bypass that whole process.

I think Senator KENNEDY would probably make a very powerful rejoinder that we have heard that we are working on it a lot and we need to now get to the point where we put solutions here on the floor for the entire Senate to consider, but today is not the day to do it by a unanimous consent request, and for that purpose I do object.

The PRESIDING OFFICER. The objection is heard.

The Senator from Louisiana.

Mr. KENNEDY. Mr. President, my colleague, the Senator from Idaho, knows how much I respect him, and I certainly appreciate the invitation to work with him and his committee, and I intend to do that.

And I know that the Senator didn't say this, but I don't believe in government-run healthcare. But we have a discrete problem here and a very unique situation that can be addressed. This is not a biologic, as I said earlier, that costs hundreds of millions of dollars to develop. This is insulin, and a lot of Americans need it or they will die.

There is a monopoly, and there are efforts that have been made to maintain that monopoly, and my people in Louisiana—I know the people in Idaho—many of them feel the same way, and that is why they applaud Senator CRAPO's efforts, but they are hurting.

You can die without insulin. You can die. And it costs 10 bucks a vial to make, and it has been around 100 years, and now it costs 375 bucks. And all you have to do is walk across the border into Canada, and you can buy it for 50 bucks.

The market is being manipulated. I know it is complicated, and I understand politics. I have been around it a good portion of my life, but this is an

issue where we need to stop—we need to stop—talking about it, strutting around, issuing press releases, holding hearings, and doing nothing.

I don't want to price fix. I don't. It makes me real uncomfortable to be proposing this, but I don't know what else to do. There comes a point where patience—where patience—ceases to be a virtue.

And here is what I know. I mean, the bill has been objected to, and I appreciate it. You pass a bill like this or a similar bill like this; you are going to see a solution pretty fast. You are going to see a solution real fast. You are going to see some—this opaque market react with new energy. They are going to be running around like hounds from hell, trying to keep this from becoming the law, and that is why we need to hit this head-on.

But with that, I thank the President for his attention, and I thank my colleague for his eloquent remarks.

I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The bill clerk proceeded to call the roll.

Mr. SCHUMER. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.

The PRESIDING OFFICER. Without objection, it is so ordered.

COVID-19 HATE CRIMES ACT

The PRESIDING OFFICER. Under the previous order, all postcloture time has expired, and the motion is agreed to.

The clerk will report the bill by title.

The bill clerk read as follows:

A bill (S. 937) to facilitate the expedited review of COVID-19 hate crimes, and for other purposes.

EXECUTIVE SESSION—MOTION TO PROCEED

Mr. SCHUMER. Mr. President, I move to proceed to executive session, and I ask for the yeas and nays.

The PRESIDING OFFICER. Is there a sufficient second?

There appears to be a sufficient second.

The clerk will call the roll.

The bill clerk called the roll.

Mr. DURBIN. I announce that the Senator from Vermont (Mr. SANDERS) is necessarily absent.

Mr. THUNE. The following Senators are necessarily absent: the Senator from Kansas (Mr. MARSHALL), the Senator from Kansas (Mr. MORAN), the Senator from Ohio (Mr. PORTMAN), the Senator from South Dakota (Mr. ROUNDS), and the Senator from North Carolina (Mr. TILLIS).

Further, if present and voting, the Senator from Kansas (Mr. MARSHALL) would have voted "no."

The result was announced—yeas 49, nays 45, as follows: